d

UNITED STATES CIVIL SERVICE COMMISSION
BUREAU OF RETIREMENT, INSURANCE, AND OCCUPATIONAL HEALTH
WASHINGTON, D.C. 20415

IN REPLY PLEASE REFER TO
RL: INS:E

JUL 19 1974

YOUR REFERENCE

STATINTL [redacted] President
Government Employees Health Association
Post Office Box 463
Washington, D.C. 20044

STATINTL [redacted]

The changes in benefits for the Association Benefit Plan for the contract term beginning January 1, 1975, proposed in your letter of April 26, 1974, are approved.

STATINTL [redacted] various changes in brochure language necessary to effect these benefit changes, and other editorial changes intended to clarify present benefit provisions. We enclose a copy of a marked-up brochure which reflects these changes, and will appreciate your review and comments as soon as possible.

Many plans, including the Service Benefit Plan and the Indemnity Benefit Plan, now provide maternity benefits for all females covered under either Self Only or Self and Family enrollments, and we are asking every plan in the Federal program to provide maternity benefits on this basis. Consequently, we counterpropose that the Association Benefit Plan consider paying maternity benefits for all females covered under either Self and Family or Self Only enrollments.

Our Actuary has discussed with Mr. Holt of Mutual of Omaha the costs assigned to the benefit changes. These costs will be subject to further review when the Plan's 1975 rate proposal is submitted.

Your cooperation in responding promptly to our counterproposal, and your review and comment on the brochure, will be greatly appreciated.

Sincerely yours,

Thomas A. Tinsley

Thomas A. Tinsley
Director

Enclosure

# Medicaid Abortions Gain in Court

Continued From Page 1

planation, or hint, of the Court's reasoning.

Presumably, though, the Court relied at least in part on the arguments of the Solicitor General, in view of the Government's role as defender of the statute.

It is unclear when the Court will rule on the merits of the controversy or how long today's order will be in effect.

Before the new statute was enacted, the Court had agreed to review, in the current court year, a case involving a restriction that the state of Connecticut had already imposed on the use of funds for elective abortions. The lower court in that case ruled that the restriction was unconstitutional.

That case is still on the docket and, in fact, the Court today also refused a request by Connecticut's Commissioner of Social Services for a stay, pending appeal, of that lower court order.

### Several Choices Open to Court

The Court could go ahead and hear and decide the Connecticut case without waiting for an appeal of the Brooklyn court decision on the new statute. Or, it could await the appeal and decide both together. Or it could postpone the Connecticut case while it decided the new Brooklyn case.

Whatever the Court decides to do will probably take several months. Its action today means that throughout that period Medicaid funds will continue to be available for abortions, at least to the same extent as they are available forwomen who choose to continue their pregnancies.

Today's dispute is part of the aftermath of the Supreme Court's 1973 decision striking down state statutes that made it a crime for a woman to get an abortion.

That decision estabilised that the constitutional right to plivacy included the right to decide, with one's doctor, whether to continue or to terminate a pregnancy. But the decision, was not self-enforcing. It did not specify a right to the means of obtaining an abortion.

Following that ruling, various states imposed restrictions on abortions, including the limitation, in some states, on the use of public facilities and funds for abortions.

### Legal Questions Are Posed

For women on welfare, these limitations mean as a practical matter that abortion is unavailable, or difficult to obtain. They thus also mean that well-to-do-women have an easier time getting abortions than do indigent women.

Legally, these practical effects pose several questions: Whether the denial of public facilities and funds for abortions denies indigent women their constitutional right, established by the 1973 ruling, to decide whether or not to complete their pregnancies, and whether the disparate treatment of rich and poor denies the poor equal protection of the laws.

As soon as the new Federal law—generally known as the Hyde amendment, after its sponsor, Representative Henry J. Hude—was enacted, lawsuits were filed in several jurisdictions challenging it.

Two were filed in New York one by the corporation and one by a New York Medicaid recipient named Cora McRae, who had decided to have an abortion; by Planned Parenthood, and by a doctor, Irwin B. Teran.

Judge John F. Dooling of Federal District Court ruled on the issue Oct. 22. In his order he directed the Secretary of H.E.W. to notify regional directors of his agency that the agency would continue to finance costs of abortions on the same basis as costs of pregnancy and childbirth.

The Government asked the District Court at that point for a stay, but it was denied. Subsequently, the Government asked the District Court to amend the order to provide that Medicaid funds paid to the states as a result of the order would be subject to recoupment if the order were to be reversed on appeal. The Court denied this as well, and on Nov. 3, H.E.W. the Federal health agency sent out the required notice.

# HIGH COURT REJECTS ABORTIONS CURB NOW

## Justices Refuse to Block Payment for Elective Medicaid Cases

By LESLEY OELSNER

Special to The New York Times

WASHINGTON, Nov. 8—The Supreme Court refused today to block the payment of Medicaid funds for elective abortions, at least for the time being.

The Court's action means that a new Federal statute that bars the use of Federal funds for abortions unless abortion is necessary to save the life of the mother will not go into effect for many months, if at all.

A Federal District Court in Brooklyn ruled last month that the statute was unconstitutional and ordered that Federal reimbursement for the costs of abortions continue on the same basis as reimbursements for the costs of pregnancy and childbirth-related services.

Technically, what the Court did today was to deny a request by Senator James L. Buckley of New York and others for a stay blocking enforcement of the District Court order pending appeal.

### Opposed a Court Stay

The Court's action was a victory for New York City. The City's Health and Hospitals Corporation initiated one of the two lawsuits challenging the new statute that led to the District Court's decision. The corporation also opposed the request for a Supreme Court stay of that decision, telling the Court, in a memorandum, that a stay would subject the corporation to a "grave and irreparable injury."

The Government defended the new statute in the litigation before the District Court and is expected to defend it before the high court as well. However, in a memorandum to the Court on behalf of the Secretary of Health, Education and Welfare, Solicitor General Robert H. Bork also opposed the granting of a stay on the ground that the various requirements for issuing a Supreme Court stay had not been met.

The Justices announced their ruling in a one-sentence entry on a nine-page list of orders issued this morning that contained their decisions or actions on dozens of other cases as well. No Justice recorded a dissent, and there was no ex-

Continued on Page 24, Column 1